

## **CONTRACT CLASS INSTRUCTOR APPLICATION**

GENERAL INFORMATION								
Instructor's Name								
			Zip					
Social Security # or Tax ID #								
			Evening Phone					
Email		Website	Website					
CA Drivers License		Expires	Expires					
Have you ever been convicted	of any charges other tha	an minor traffic citations:	☐ Yes ☐ No					
If yes, please explain:								
	QUA	ALIFICATIONS						
EDUCATION								
Have You Completed High Sch	ool: ☐ Yes ☐ No							
COLLEGE/UNIVERSITY	DATES ATTENDED	MAJOR	DEGREE					
Professional training cortificat	and licenses related to pr	conocod class:						
CURRENT OR RECENT EXPERIENCE RELATED TO PROPOSED CLASS								
EMPLOYER	PHONE	DATES EMPLOYEED	JOB TITLE/DUTIES					

## CLASS PROPOSAL

Class Title:					
Targeted Age Group:	Minimum Number of Students:				
Number of Classes Per Week:	Maximum Number of Students:				
Preferred Class Day(s):	Proposed Class Fee:				
Preferred Class Time(s):	Additional Materials Fee:				
Are you requesting a City facility: $\square$ Yes $\square$ No					
If <b>YES</b> , what are your proposed facility requirements:					
Number of Tables Number of Chairs Are electrical outlets needed:   No					
Other requirements:					
If <b>NO</b> , where do you plan to teach this class:					
RE	EFERENCES				
Contact Person:	Phone:				
Business:	Title:				
Contact Person:	Phone:				
Business:	Title:				
Contact Person:	Phone:				
Business:	Title:				
liability resulting in injury which may be suffered by me arising out above listed activities at City of Beaumont facilities, save and exceemployees.  It is understood and agreed that there is no relationship of employee	ont, its officers, agents and employees harmless from and against any and all to for in any way connected with my participation in the conducting of the ept for the sole negligence or intentional misconduct of the City or its er-employee for Worker's Compensation purposes between the City of Beaumont above listed activities unless, such person is otherwise regularly employed by and				
Signature:	Date:				

## **CLASS OUTLINE**

ease briefly describe the format of the class, such as method of teaching (demonstration, lecture, visual aids, andouts, etc.), forms of publicity or advertising, special requirements (a parent must attend, pre-requisites or cior experience needed by participant):							
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Please return signed and completed application to the

## **BEAUMONT PARKS AND RECREATION DEPARTMENT**

1310 Oak Valley Parkway, Beaumont, Ca 92223